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PTO/SB/01 (12-97)  
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	00756-03
	<b>First Named Inventor</b>	WALKER, William F.
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	<b>Examiner Name</b>	

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**AN INTUITIVE ULTRASONIC IMAGING SYSTEM AND RELATED METHOD THEREOF**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **03/06/2003** as United States Application Number or PCT International

Application Number **PCT/US03/06607** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/362,763	03/08/2002

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US03/06607	03/06/2003	

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Robert J. Decker	44,056		
Rodney L. Sparks	53,625		
Robert S. MacWright	32,425		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 34444 OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
William F.		Walker	
Inventor's Signature	<i>William F. Walker</i>		Date
			8-27 2004
Residence: City	Charlottesville	State	VA
		Country	US
Post Office Address	800 Windrift Drive VA		
Post Office Address			
City	Earlsville	State	VA
		ZIP	22936
		Country	US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

**Name of Additional Joint Inventor, if any:**

☐ A petition has been filed for this unsigned inventor

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Family Name or Surname

John A.

Hossack

Inventor's  
Signature

Date

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State VA

Country US

Citizenship U.S.  
~~United Kingdom~~

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Mailing Address

City Charlottesville

State VA

ZIP 22901

Country US

**Name of Additional Joint Inventor, if any:**

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Travis N.

Blalock

Inventor's  
Signature

Date

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State VA

Country US

Citizenship US

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Mailing Address

City Charlottesville

State VA

ZIP 22901

Country US

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City

State

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☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

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Name	Registration Number	Name	Registration Number
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Rodney L. Sparks	53,625		
Robert S. MacWright	32,425		

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Direct all correspondence to: ☒ Customer Number or Bar Code Label 34444 OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

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Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
William F.	Walker

Inventor's Signature				Date	
Residence: City	Charlottesville	State	VA	Country	US
Post Office Address	800 Windrift Drive				
Post Office Address					
City	Earlsville	State	VA	ZIP	22936
				Country	US

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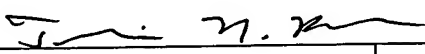
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Given Name (first and middle [if any])		Family Name or Surname	
John A.		Hossack	
Inventor's Signature		Date	
Residence: City Charlottesville	State VA	Country US	Citizenship United Kingdom
Mailing Address 617 Davis Avenue			
Mailing Address			
City Charlottesville	State VA	ZIP 22901	Country US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Travis N.		Blalock	
Inventor's Signature 		Date 9/7/04	
Residence: City Charlottesville	State VA	Country US	Citizenship US
Mailing Address 3085 Beaumont Farm Road			
Mailing Address			
City Charlottesville	State VA	ZIP 22901	Country US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
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Mailing Address			
City	State	ZIP	Country

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